

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS
900 S.W. Jackson Street, Suite 507 Topeka, Kansas 66612-1257
<http://www.kansas.gov/ksbtp> (785) 296-3053

All applicants should read all statutes, rules and regulations for specific detail regarding the application requirements.

IMPORTANT INFORMATION FOR LANDSCAPE ARCHITECTURAL EXAM APPLICANTS

Applicants wishing to take the Landscape Architecture Registration Examination (LARE) to become licensed in the state of Kansas must first establish a CLARB council record, register with CLARB for the exam and pass all LARE sections.

Once you have taken and passed all sections of the LARE, request your CLARB Council Record be sent to the Kansas Board. The CLARB file contains the official documentation of your work experience, formal education, references, and exam history. The Kansas Board will evaluate your record.

At the time you request your CLARB file be sent to our office, fill out and send in the attached application form.

REQUIREMENTS: (See attached Table of Requirements)

EDUCATION

ACCREDITED DEGREE REQUIRED- All landscape architectural applicants for original license must be a graduate of either a baccalaureate or master's curriculum accredited by the LAAB (Landscape Architectural Accreditation Board).

EXPERIENCE

In accordance with K.A.R. 66-10-4(2), "Beginning April 1, 1995, each applicant for examination shall provide a record of landscape architectural experience that has been compiled and transmitted by the Council of Landscape Architectural Registration Boards (CLARB)."

EXAMINATION

In accordance with K.A.R. 66-8-5, "The examination required of an applicant for landscape architectural licensure shall be the landscape architect registration examination as prepared by the national council of landscape architectural registration boards (CLARB)."

The address and telephone number for CLARB is as follows:

CLARB
144 Church Street NW, Suite 201
Vienna, VA 22180
(703) 319-8380

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS
900 SW JACKSON STREET, SUITE 507
TOPEKA KS 66612-1257
(785) 296-3053

application for landscape architect registration

FILE NO.: _____ NAME AS DESIRED ON SEAL: _____
(Not to exceed 20 characters)
DATE: _____ SOCIAL SECURITY NO: _____

FIRM NAME: _____

BUSINESS
ADDRESS: _____

STREET: _____

CITY: _____

STATE: _____

ZIP: _____

STREET: _____

RESIDENCE
ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

ADDRESS FOR CORRESPONDENCE: ____RESIDENCE ____BUSINESS TELEPHONE (8:00 a.m. - 4:30p.m.) (____)

CITIZENSHIP: Are you a U.S. Citizen? Yes ____ (birth ____ naturalized ____) No ____ (If not, attach a recent photograph or other documentation that sufficiently identifies you and a copy of your alien registration.)

IN ACCORDANCE WITH K.A.R. 66-9-2, YOUR DEGREE MUST BE "...accredited by the landscape architectural accreditation board (LAAB)..."

IS YOUR DEGREE ACCREDITED BY LAAB? _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR HAD ANY DISCIPLINARY OR ADMINISTRATIVE ACTION COMMENCED AGAINST YOU? ____YES ____NO

(IF "YES", EXPLAIN ON A SUPPLEMENTAL SHEET.)

I HEREBY APPLY FOR REGISTRATION AND LICENSE TO PRACTICE LANDSCAPE ARCHITECTURE BY WRITTEN EXAMINATION

SIGNATURE OF APPLICANT _____

DATE _____

IT IS YOUR RESPONSIBILITY TO KEEP A
COPY OF THIS APPLICATION FOR YOUR
RECORDS.

FOR BOARD USE ONLY	
FILE NO. _____	AMT. RECD. _____
DATE _____	LIC. NO. _____

Kansas State Board of Technical Professions

TABLE OF REQUIREMENTS FOR LANDSCAPE ARCHITECTURE ORIGINAL LICENSE				
Pipeline	Classification	Maximum Credit for Education in Years	Minimum Required Experience in Years	Total Required Education & Experience
A	Graduate of a LAAB (5) year accredited Baccalaureate Landscape Architectural Program	5 years	3 years	8 years
B	Graduate of a LAAB (4) year accredited Baccalaureate Landscape Architectural Program	4 years	4 years	8 years